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CONFIRMATION NO. 9230

<b>SERIAL NUMBER</b> 09/662,278	<b>FILING OR 371(c) DATE</b> 09/14/2000 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2686	<b>ATTORNEY DOCKET NO.</b>
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/26/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

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## TITLE

METHOD AND SYSTEM FOR PORTABLE CELLULAR PHONE VOICE COMMUNICATION AND POSITIONAL  
LOCATION DATA COMMUNICATION

<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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